

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Joseph P.R. Tosey

Docket: 50014.US01

Title: OPERATING SESSION REAUTHORIZATION IN A USER-OPERATED DEVICE

16586 U.S. PTO  
09/551919  
04/19/00



## CERTIFICATE UNDER 37 CFR 1.10

'Express Mail' mailing label number: EH974036687US

Date of Deposit: April 19, 2000

I hereby certify that this paper or fee is being deposited with the United States Postal Service 'Express Mail Post Office To Addressee' service under 37 CFR 1.10 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

By: \_\_\_\_\_  
Name: Kay Howe

BOX PATENT APPLICATION  
Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

We are transmitting herewith the attached:

- Transmittal sheet, in duplicate, containing Certificate under 37 CFR 1.10.  
 Utility Patent Application: Spec. 7 pgs; 34 claims; Abstract 1 pgs.  
 The fee has been calculated as shown below in the "Claims as Filed" table.  
 Design Patent Application: Spec. pgs.  
 2 sheets of drawings  
 Certified copy of a application, Serial No. , filed , the right of priority of which is claimed under 35 U.S.C. 119  
 Small entity status will be established at a later date  
 Verified statement to establish small entity status  
 A signed Combined Declaration and Power of Attorney  
 An unsigned Combined Declaration and Power of Attorney  
 Assignment of the invention to Glenayre Electronics, Inc., Recordation Form Cover Sheet  
 A check in the amount of \$1018.00 to cover the Filing Fee  
 A check for \$40.00 to cover the Assignment Recording Fee.  
 Computer readable form of . Applicants state that the paper copy form of the application, and the computer readable form submitted herewith, are the same.  
 Other:  
 Return postcard

## CLAIMS AS FILED

Number of Claims Filed	In Excess of:	Number Extra	Rate	Fee
<b>Basic Filing Fee</b>				\$710.00
<b>Total Claims</b>				
34	-	20	= 14 x 22.00 =	\$308.00
<b>Independent Claims</b>				
3	-	3	= 0 x 78.00 =	\$0.00
<b>MULTIPLE DEPENDENT CLAIM FEE</b>				\$0.00
<b>TOTAL FILING FEE</b>				\$1018.00

Please charge any additional fees or credit overpayment to Deposit Account No. 13-2725. A duplicate of this sheet is enclosed.

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